

Please type a plus sign (+) inside this box →

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No.

First Inventor

Kenneth P. Hinckley et al.

Title

TOUCH-SENSITIVE DEVICE FOR SCROLLING A DOCUMENT ON A DISPLAY

Express Mail Label No.

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 25]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the invention
  - Brief Summary of the invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 7]
5. Oath or Declaration [Total Pages 9]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for a continuation/divisional with Box 18 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATIONS PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. §3.73(b) Statement of Power of Attorney (when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations]
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: \_\_\_\_\_

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:


☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_ / \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 28319 or ☐ Correspondence address below  
(Insert Customer No. or Attach bar code label here)

Name					
Address					
City	State	Zip Code			
Country	Telephone	Fax			

Name (Print/Type)	Robert S. Katz	Registration No. (Attorney/Agent)	36,402
Signature			Date 8/29/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL**  
**for FY 2001**

*Patent fees are subject to annual revision.*

**Complete if Known**

Application Number	TO BE ASSIGNED
Filing Date	August 29, 2001
First Named Inventor	Kenneth P. Hinckley et al.
Examiner Name	TO BE ASSIGNED
Group / Art Unit	TO BE ASSIGNED
Attorney Docket No.	03797.00124

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b>	<b>1646</b>
--------------------------------	-------------	-------------

Attorney Docket No.	03797.00124
---------------------	-------------

**METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit  
Account  
Number

19-0733

Deposit  
Account  
Name

BANNER & WITCOFF, LTD.

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

- ☐ Check    ☐ Credit card    ☐ Money Order    ☐ Other

### FEE CALCULATION

1. BASIC FILING FEE					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	710
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

**SUBTOTAL (1)**

(\$) 710

## 2. EXTRA CLAIM FEES

			Extra Claims		Fee from below		Fee Paid
Total Claims	52	-20**	= 32	X	18	=	576
Independent Claims	7	-3**	= 4	X	80	=	320
Multiple Dependent				X		=	0

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$) 896

**\*\*or number previously paid, if greater; For Reissues, see above**

**FEE CALCULATION (continued)**

### 3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	65	Surcharge - late filing fee or oath	
127	50	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	130	Non-English specification	
147	2,520	2,520	For filing a request for reexamination	
112	920*	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	110	55	Extension for reply within first month	
116	390	195	Extension for reply within second month	
117	890	445	Extension for reply within third month	
118	1,390	695	Extension for reply within fourth month	
128	1,890	945	Extension for reply within fifth month	
119	310	155	Notice of Appeal	
120	310	155	Filing a brief in support of an appeal	
121	270	135	Request for oral hearing	
138	1,510	1,510	Petition to institute a public use proceeding	
140	110	55	Petition to revive – unavoidable	
141	1,240	620	Petition to revive – unintentional	
142	1,240	620	Utility issue fee (or reissue)	
143	440	220	Design issue fee	
144	600	300	Plant issue fee	
122	130	130	Petitions to the Commissioner	
123	130	130	Petitions related to provisional applications	
126	180	180	Submission of Information Disclosure Stmt	
581	40	40	Recording each patent assignment per property (times number of properties)	40
146	710	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	355	Request for Continued Examination (RCE)	
169	900	900	Request for expedited examination of a design application	
Other fee (specify) _____				


\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(S) 40

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Robert S. Katz	Registration No. Attorney/Agent)	36,402	Telephone	(202) 508-9100
Signature				Date	8/29/01

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.